

Finally, he speaks of the place of women's work in therapeutics. "No one can fail to be impressed if he observes the steady increase in the amount of therapeutics now recognized to be best carried out by women. It has long been true that in the division of labor between doctor and nurse the doctor has made the diagnosis and prescribed the treatment, the nurse or the house-mother has carried out the treatment. It has also been long recognized that male nurses are seldom a success. There is in women a strong natural taste and aptitude for the very work of detailed therapeutics which we call nursing, an aptitude very conspicuous by its absence in most men.

"Within ten years we have witnessed a very interesting development in the functions of the nurse. We have now not only the nurses trained for massage and for physical therapeutics of other physical types, but the Nauheim bath nurses, the school nurses, the nurse who teaches and directs infant feeding. As fast as any branch of physical therapeutics is worked out to any degree of perfection we find it economy of time and labor to hand it over to those naturally fitted to carry out its details with the patience, tact and deftness that come from natural instinct and aptitude.

"In the newer psychic and physiologic fields which medicine has begun to invade I have no doubt that women will find a large field of usefulness. Social work and psychic therapy as they are practised independent of medicine are now overwhelmingly in the hands of women, and I see no reason for shifting these forms of therapeutics into other hands when they come to be more fully recognized and assimilated by medical practise. The effective application of all therapeutics (if you except surgery) is women's work."

ECLAMPSIA

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As eclampsia is generally considered the most serious complication of childbirth except hæmorrhage, we should have a perfect knowledge of the disease. Although it is said to occur but once in each three hundred and thirty cases and is not met frequently by the nurse, it is of such a serious nature that it requires the most skilful attention when it does occur. The following definition of eclampsia is given us by Dr. Jewett: "An acute morbid condition making its advent during pregnancy, labor, or the puerperal state, which is characterized by a series of tonic and clonic convulsions affecting first the voluntary, then the

involuntary, muscles, accompanied by complete loss of consciousness and ending in coma or sleep.”

The convulsions in eclampsia are most horrible and come on suddenly, although there may have been premonitory symptoms such as headache, restlessness and insomnia, dizziness, vomiting, pain in pit of stomach, blurred vision, unusual irritability, and a lessened secretion of highly-colored urine. The occurrence of any of these symptoms should be reported at once to the physician, as it is possible in some cases to avoid an attack, if preventive measures are taken early. Eclampsia sometimes occurs early in pregnancy, long before the nurse's duties have begun with the patient, and these early attacks are more serious as a rule than those which occur later, or during delivery. When a nurse is present during an attack, she should give attention to the patient's tongue, as it is sometimes bitten or may fall back and cause the patient to choke. The convulsions usually cease when labor is ended, but may continue for several days, and death may follow some time after the delivery. It is the nurse's duty to note the amount and character of urine from the time she takes charge of a pregnant patient, as reports of obstetricians show that eclampsia is caused largely by renal diseases, although a number of cases have been observed where there were no renal disturbances. The danger of eclampsia, however, is materially lessened where sufficient urine is passed. During pregnancy, all elimination should be kept up freely. When a patient, during gestation, shows a tendency toward albuminuria, she is kept upon a non-nitrogenous diet and sometimes upon a strictly milk diet.

The maternal mortality in eclampsia is estimated at thirty per cent. while death to the fœtus occurs in at least fifty per cent. of these cases; one severe convulsion may kill the fœtus.

A child born of an eclamptic parent should receive the most careful attention, on the part of the nurse, as its vitality is very much reduced and supportive measures are necessary. Only too often these little lives are lost during the first twenty-four hours.

Eclampsia is more frequent in primiparæ than in multiparæ but in whatever case it may occur, it is an emergency of the most severe character and requires skilful, alert attention. It is a sad fact that eclampsia is often followed by insanity, apoplexy, and Bright's disease.